

ENTRY BLANK

7-U

SAOP

PLEASE TYPE OR PRINT

* ☐ Ms.☐ Mr. Artist Sharon Horvath

(Last Name Last)

Permanent Address 5334 Mardale Bedford Hts.

Street

City

Ohio 44146

Daytime Tel. 216 232-7079

Zip

Area Code

Temporary or Studio Address 2302 Spurge St. Phila, PA

Street

City

19103Daytime Tel. 215-985-0401

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? Cuyahoga

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

*☒ Artist will pick up at Museum.☐ Museum should dispose of.☐ Museum should ship to artist at artist's expense to this address: Sally Horvath

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature Sharon Horvath

DO NOT DETACH

DO NOT DETACH

ENTRY BLANKS

1

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Materials

Oil on Canvas

Title Red Plane Painting

Price or NFS

340.00

Insurance Value
if NFS Only

Size

12x15"

22.10 GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

~~X~~

REJECTED

DO NOT WRITE IN THIS SECTION

223(1)

ACCEPTED

~~X~~

REJECTED

DETACH

2

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Materials

Oil on canvas

Title

CLOISTER

Price or NFS

300.00

Insurance Value
If NFS Only

Size

12" x 12"

19.50 GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

~~X~~

REJECTED

DO NOT WRITE IN
THIS SECTION

224(1)

ACCEPTED

~~X~~

REJECTED

RECEIVED

ASB

DATE

5/13

1985 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

SHARON HORVATH
Name C/O MOORE

2302 SPRUCE STREET
Address

PHILADELPHIA PA 19103
City & State Zip

NOTIFICATION #2

DO NOT
DETACH**1**

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Title

Red Plane Painting

DO NOT WRITE IN THIS SECTION

223(1)

ACCEPTED

REJECTED

2

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Title

CLOISTER

DO NOT WRITE IN THIS SECTION

224(1)

ACCEPTED

REJECTED

RETURN OF OBJECTS:

REJECTED: JUNE 4-8

ACCEPTED: JULY 29-AUGUST 3

It is understood that the Museum will have the right to dispose
for its own account any object not called for by the dates listed

This is your only receipt to claim your object(s).